

FORM 3A

REGISTRATION AS REGISTERED REPRESENTATIVES

Pursuant to section 51(2) of the Securities Act, 2012 and by-laws 21 and 22 of the Securities (General) By-Laws, 2013

| | |
|------------------------------|--|
| General Instructions: | <p>Please complete all relevant sections; where the allocated space is insufficient, you may continue on a separate page and attach to the completed form. All supporting information and attached pages should be appropriately numbered and referenced. See detailed list of required attachments.</p> <p>This form and any attachments should be certified by the by the Chief Executive Officer and two directors of the Applicant. Where the Chief Executive Officer is unavailable to sign the form, the form should be signed by any other duly authorized senior officer whose proof of authorization must be submitted with this form.</p> <p>Completed applications should be submitted to:</p> <p style="text-align: center;">The Director Disclosure Registration and Corporate Finance Trinidad and Tobago Securities and Exchange Commission 57-59 Dundonald Street Port of Spain Trinidad</p> |
| Item 1 | Please mark "x" by the relevant checkbox to indicate the type of registration being sought. I.e. initial registration, renewal, or reinstatement |
| Item 2 | State the name of the Registrant and its category of registration under section 51(1) that is making the application for the registered representatives. |
| Item 3 | Complete Appendix 1 stating the name and full contact details of the persons who are to be registered as registered representatives. Also, state the proposed category of registration being sought for each registered representative. Each registered representative named in this section must have completed Form 3B and met the fit and proper requirements for a registered representatives prior to the submission of Form 3A. |
| Item 4 | Please mark "x" by the relevant checkbox to indicate your response. |
| Item 5 | Please enter any additional information required to establish an applicant's qualification and suitability for registration. |

| | |
|---------------|---|
| Item 6 | Date the application. Include the signature of the Chief Executive Officer and two directors of the Registrant. Where the Chief Executive Officer is unavailable to sign the form, the form should be signed by any other duly authorized senior officer whose proof of authorization must be submitted with this form. |
|---------------|---|

Required Attachments:

1. Appendix 1 – List of registered representatives
2. The relevant application fee.

FORM 3A

REGISTRATION OF REGISTERED REPRESENTATIVES

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1. TYPE OF APPLICATION

| | |
|----------------|--------------------------|
| Initial | <input type="checkbox"/> |
| Renewal | <input type="checkbox"/> |
| Re-Instatement | <input type="checkbox"/> |

2. REGISTRANT INFORMATION

| Name of Registrant | Category of Registration |
|--------------------|--------------------------|
| | |

3. LIST OF REGISTERED REPRESENTATIVES (see Appendix 1)

4. AFFIRMATION OF DOCUMENTATION AND FIT AND PROPER REQUIREMENTS

Confirm that the following statements are true with regard to the persons named in Appendix 1

| | YES | NO |
|--|--------------------------|--------------------------|
| a) Have the requirements of By-law 22 been compiled with? | <input type="checkbox"/> | <input type="checkbox"/> |
| b) At the time of this application, has each person completed or updated the Form 3B? | <input type="checkbox"/> | <input type="checkbox"/> |
| c) Has a copy of a valid government issued identification (passport, driver's permit or national identification card) been obtained? | <input type="checkbox"/> | <input type="checkbox"/> |
| d) Has a certified copy of the person's educational qualifications been obtained? | <input type="checkbox"/> | <input type="checkbox"/> |
| e) Has a curriculum vitae been obtained? | <input type="checkbox"/> | <input type="checkbox"/> |
| f) Does the person meet the fit and proper requirements for the purposes of the Act? | <input type="checkbox"/> | <input type="checkbox"/> |

5. ADDITIONAL INFORMATION

| Please provide any additional information required to establish the applicant's qualification and suitability for registration |
|--|
| |

6. DATE, CERTIFICATION AND SIGNATURE

I hereby certify that the statement and information contained in this form and any attachment hereto are true and correct to the best of my knowledge and belief and submitted in compliance

with the provisions of the Securities Act, 2012. I understand that any misrepresentation, falsification or material omission of information on this application may result in a breach of the Securities Act, 2012.

| | | |
|-------------------|-------------------|-------------------|
| _____ | _____ | _____ |
| Print Name | Print Name | Print Name |
| _____ | _____ | _____ |
| Signature | Signature | Signature |
| _____ | _____ | _____ |
| Position | Position | Position |
| _____ | _____ | _____ |
| Date | Date | Date |

FOR OFFICIAL USE ONLY

| Tool | ID Information |
|---|-----------------------|
| Registrant's Number | |
| Director's Number | |
| Document / Record Number | |
| Records Management Date Received (dd/mm/yyyy) | |

Approved By : _____ Date (DD/MM/YYYY) _____

APPENDIX 1

PLEASE NOTE: FORM 3A will be considered NULL and VOID unless it includes Appendix 1

List the names and contact information of the persons who are to be registered as registered representatives. Also state the proposed category of registration being applied for.

| Name | Address | Home Phone (1-xxx-xxx-xxxx) | Work Phone (ext.) (1-xxx-xxx-xxxx) (xxx) | Mobile Phone (1-xxx-xxx-xxxx) | Date of Birth (dd/mm/yyyy) | Type of ID (DP, PP, Nat. ID) | ID Number | Job title / Position | Summary of Education Qualification | ADR ¹ | BKR ² | UDR ³ | ASR ⁴ |
|------|---------|--------------------------------|---|----------------------------------|-------------------------------|---------------------------------|-----------|----------------------|------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

¹ *Advising Representative*

² *Brokering Representative*

³ *Underwriting Representative*

⁴ *Associate Representative*